

14 OSS WING SCHEDULING

ORIENTATION FLIGHT QUESTIONNAIRE

PERSONAL DATA - PRIVACY ACT OF 1974 (5 USC 552A)

Please complete the shaded blocks

FULL NAME:		RANK:	
SSAN:		ORG:	Civil Air Patrol
DUTY #:	7039		
JOB POSITION/DUTY TITLE:	Cadet		

Please answer the following questions. These answers are required prior to initiating your orientation flight package.

1. Have you received an orientation flight in an aircraft during your tour at Columbus AFB?	No
2. If not, which aircraft you do you request to fly in?	T-1
3. If you have had a flight, would you like a simulator flight?	Yes
4. If would like a simulator flight, which aircraft?	T-37/T-38
5. Do you currently hold a military aeronautical rating?	No
6. Do you have any health concerns pertinent to the flight?	No
7. If so, please state your concerns.	
8. Are you under 18 years of age?	yes
8. Are you a Foreign National?	no
9. Do you have any requests or questions? If so, please state.	

Please have the following measurements taken by the flight surgeon/medical technician or your orderly room:

1. Weight:		2. Standing Height:		3. Sitting Height:	
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Date questionnaire finished:

Please note that all of the above information is needed before we start your package. If you have any questions regarding this form, please feel free to contact Lt Col Comstock at (228) 872-1555 or at the following address: george.comstock@keesler.af.mil